

of anthrax, tetanus, malignant œdema, tuberculosis, erysipelas, or any of the pus germs, especially the streptococcus, into the tissues of a patient! Think of it, I beg you, and be ever on the alert. Such a crime is little short of murder. Let me repeat it: the bacteria introduced into our tissues are our deadliest enemies; outside of the body they may be our friends. Strive by all means in your possession to get rid of all sepsis, for your lives and mine must be largely spent in fighting the bacteria.

THE WORK OF THE INDIAN ARMY NURSING SERVICE*

By MISS WATT
Allahabad, India

IN attempting to give a brief account of the Indian Army Nursing Service, its advantages and disadvantages, in a way which may possibly be helpful to some intending candidate, two difficulties present themselves: first, that it is almost impossible to give an accurate picture of Anglo-Indian life to those who are strangers to it; in the second place, it must never be forgotten that fifteen years have to be spent in any part of India, and no one can foretell the effects of climate on the health.

Fifteen years' hard labor in a trying climate ought only to be attempted by the vigorous and strong. A weakly, delicate woman is not only a burden to herself, but a source of never-ending anxiety to her superiors, while her work must necessarily be less well done, however excellent her intentions.

All the rules and conditions of the service are clearly laid down in a small blue-book issued half yearly. This in itself is no small advantage, as before engagement all the rules can be studied and each candidate can be sure of the nature of her agreement.

Application for admission is made in the first instance to the Under Secretary of State for India, India Office, S. W., and a form is received which must be accurately filled up and returned with the numerous necessary certificates attached.

If the candidate be accepted, she receives fifteen pounds outfit allowance (which is quite insufficient), and she will probably be ordered to embark on a transport about a month after appointment.

Pay begins from date of embarkation, with the addition of exchange compensation allowance, and the deduction of income tax (which always

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seems an unnecessary hardship). The pay averages one hundred and eighty rupees per month, about eleven and a half pounds English money. This sounds high, but it must be remembered that board is not included. The sisters receive from government free "furnished" quarters, fuel, lights, and punkah coolies, but no allowance for messing.

The quarters allotted are, as a rule, convenient and comfortable. Each sister has a bedroom, dressing-room, and bath-room, in some cases a private sitting-room, besides a general drawing-room and dining-room for common use. "Furnished" quarters means that the heavier articles of furniture, beds, tables, wardrobes, chairs, etc., are supplied by government in each station. All cooking utensils, crockery, table and bed linen, cutlery, plate, and glass have to be found by the sisters, and this is a somewhat serious tax on the pay.

It is usual for the senior sister to do all the housekeeping, and either make a monthly charge for supplying all household necessities or charge each new-comer an entrance fee, the money being devoted to replacing wornout things and breakages. The messing bills may be taken to amount to fifty rupees per month as an average. If government could be induced to grant one hundred rupees yearly to each establishment of nursing sisters much trouble would be saved.

We will now suppose that the new sister has arrived in India, and (to take an ordinary average case) that she forms one of three sisters working in a station hospital. One sister will be on night duty for a week, her hours being from nine P.M. to seven A.M. Sister No. 1 will be on duty from seven A.M. till two P.M., and Sister No. 2 from two P.M. until eight P.M., unless there are very acute cases, when she will remain until relieved by the night sister.

These hours are slightly varied in different stations, but the above is a very usual arrangement. In comparison with a London hospital nurse's day these hours seem short, but in a bad climate and with the endless worries entailed by working with orderlies and native servants the work will be found quite sufficiently fatiguing.

Each sister is entitled to two-months' privilege leave every year on full pay. Three-days' hospital leave and ten-days' station leave can often be obtained. After serving without privilege leave for two years and nine months, three-months' leave may be granted to allow of a short visit to England. After five-years' service the sisters have one-year's furlough on two-thirds pay, with free passage out and home.

At the end of her five years a sister may retire from the service with a gratuity of five hundred rupees; after ten-years' service fifteen hundred rupees are given, and after fifteen years a pension of fifteen pounds may be hoped for. After twenty-years' service a pension of sixty pounds

a year is promised, but it seems improbable that many sisters will serve so many years.

For lady superintendents the gratuities and pensions are proportionately higher, but as there are only four lady superintendents, a sister's chances of occupying this proud position are but slender.

The senior sister in each station receives twenty-five rupees per month extra, a small enough compensation for the worries of house-keeping.

Once a year the lady superintendent inspects each station in her presidency, and writes a "confidential report" on each sister as to the manner in which she has performed her work, whether she has "maintained pleasant relations" with the other sisters, her aptitude for training orderlies, and her conduct as a whole. The lady superintendent must, of course, be guided by the reports of the medical officer in charge and of the senior sister. However, one golden rule enjoins that if the report be unfavorable, it must be communicated to the sister concerned, so if she thinks that any injustice has been done, she has an opportunity for representing her side of the case.

The sisters' intercourse with the medical officers will almost invariably be pleasant; as a rule they thoroughly appreciate good work, and the prejudice against "women in military hospitals" is almost non-existent in India. The person with whom it is sometimes difficult to work harmoniously is the Eurasian "assistant-surgeon." He combines the functions of a dresser and a dispenser, and is supposed to maintain discipline in the wards.

But while all the above conditions of service are fair, and although the sisters' Indian life may be in every way a pleasant and useful one, there are at present some grave drawbacks in the Indian military hospital system which are a hinderance to successful nursing work.

The principal changes which, in the writer's opinion, ought to be introduced are: (a) in the training of orderlies; (b) in the army native hospital corps.

(a) At present, a rough, uneducated private is introduced into a ward full of enterics. At the end of three months a miraculous change is supposed to have been effected, whereby the man is fully qualified to work by himself in charge of a ward in some hospital where there are no sisters.

Why should an uneducated man be thought capable of learning the whole art of nursing in three months, when a well-educated woman cannot be trained in less than three years? In three months the orderly can be taught to fetch and carry, to do as he is told, and to be a fairly useful pair of hands while working under a trained head. But the training of

orderlies to fit them for independent posts should surely be prolonged for at least twelve months. Then only the exceptional men, possessing the moral qualifications of sobriety and intelligence, should be given certificates. At present the orderly's certificate is not worth the paper on which it is written.

(b) The army hospital native corps is at present composed of the scum of the bazaars, insufficiently paid, working under impossible conditions (*e.g.*, a fine of two annas per month can be deducted *once* only during the month for grave misconduct among the lowest grade). Until some radical reform takes place whereby respectable natives, properly paid and severely disciplined, can be obtained, the native service of the hospital will always be a bar to really efficient work.

The chief reforms suggested in the present conditions of the working of the service are:

(a) That a messing allowance of one hundred rupees per annum be granted;

(b) That the time of the orderlies' training be increased to twelve months;

(c) That the army hospital native corps be remodelled so as to secure a certain measure of efficiency.

In conclusion, the Indian army nursing service offers every prospect of happiness and congenial work to a well-trained, strong, and healthy woman. The drawbacks which can be removed are minor ones, and the chief drawback—that of hard work in a bad climate—must be taken into account by each individual candidate before entering the service.

WAYS AND MEANS OF LIVING IN THE ADIRONDACKS

By MARIAN WATT

Graduate Johns Hopkins Hospital School for Nurses

THE outdoor treatment of tuberculosis is so generally understood that it need not be described in this paper, the object of which is to give such practical information as may be of use to some one who, perhaps without warning, is ordered to the Adirondacks, or to nurses who may be responsible for the comfort of their patients in out-of-door surroundings.

The winter is the season when the great fight against tuberculosis is made in the Adirondacks. Conditions of living are more difficult because of the extreme cold, the thermometer falling to twenty or even forty degrees below zero, and for many months the snow is so deep it is